

Corrections Standards Authority Juvenile Probation and Camps Funding (JPCF) Program 2006-07 Agreement

| A. AGENCY INFORMATION | | | | | |
|-------------------------------------------------------------------------------------------------------------------------|----------------------------|-------------------|------------------|----------------|----------|
| AGENCY NAME | CHIEF PROBATION OFFICER | | TELEPHONE NUMBER | | |
| STREET ADDRESS | CITY | | | STATE | ZIP CODE |
| STREET ADDRESS | | | | STATE | ZIF CODE |
| MAILING ADDRESS | CITY | | | STATE | ZIP CODE |
| | | | | | |
| B. DESIGNATED FINANCIAL OFFICER INFORMAT | TION | | | | |
| NAME AND TITLE | - | | TELEPHON | IE NUMBER | |
| | | | | | |
| STREET ADDRESS | | | FAX NUMBI | ER | |
| OUTV | 07475 | 710.0005 | | 20500 | |
| CITY | STATE | ZIP CODE | E-MAIL ADI | DRESS | |
| C. DAVMENT RECEIVED INFORMATION | | | | | |
| C. PAYMENT RECEIVER INFORMATION NAME AND TITLE | | | TELEBUON | E NUMBER | |
| NAME AND TITLE | | | TELEPHON | IE NUMBER | |
| STREET ADDRESS | | | FAX NUMBI | ER | |
| | | | | | |
| CITY | STATE | ZIP CODE | E-MAIL ADI | DRESS | |
| D. DAY TO DAY CONTACT INFORMATION | | | | | |
| D. DAY-TO-DAY CONTACT INFORMATION | | | TEL EDUON | E NUMBER | |
| NAME AND TITLE | | | TELEPHON | IE NUMBER | |
| STREET ADDRESS | | | FAX NUMBI | ER | |
| | | | | | |
| CITY | STATE | ZIP CODE | E-MAIL ADI | DRESS | |
| | | | | | |
| E. JPCF PROGRAM SERVICES - FIXED ALLOCA | TION | | | | |
| All counties must complete and return Attachme | nt A. | | | | |
| F. JPCF - CAMP ALLOCATION ELIGIBILITY FORM | | | | | |
| All counties must complete and return Attachme | nt B. | | | | |
| Does your county plan to participate in the camp funding portion of this program? Yes No | | | | | |
| G. BOARD OF SUPERVISORS' RESOLUTION | | | | | |
| All counties must have a Board of Supervisors' | Resolution on file contain | ning specific lan | guage (see | e Attachment (| C). |
| Does your 2006-07 JPCF Agreement (Attachment A) propose adding new programs and/or deleting current programs identified | | | | | |
| previously in your 2005-06 JPCF Agreement? |] Yes ☐ No | . 3 | | | |
| If yes, your county Board of Supervisors must ac | lopt a new resolution for | 2006-07. | | | |
| H. SIGNATURE OF CHIEF PROBATION OFFICER | | | | | |
| | | | | | |
| | | Date | e: | | |
| | | | | | |
| For CSA use only. The signature below attests to the | review and approval of thi | | | | |
| | | Date | | | |
| Executive Director, Corrections Standards | Authority | | Agreeme | ent Number: | |

ATTACHMENT A

JPCF PROGRAM SERVICES - FIXED ALLOCATION

Each participant county will receive a fixed allocation from the JPCF state fund appropriation to support a broad spectrum of probation services targeting at-risk youth, juvenile offenders (on probation and/or detained in local juvenile facilities), and their families. PLEASE SEE INSTRUCTIONS FOR SPECIFIC INFORMATION REQUIRED IN THIS SECTION.

I. TOTAL BUDGET FOR FIXED ALLOCATION

| Budget Line Items | JPCF Funds |
|-------------------------------|--------------------------|
| Salaries and Benefits | \$ |
| Services and Supplies | \$ |
| Professional Services | \$ |
| Community-Based Organizations | \$ |
| Fixed Assets/Equipment | \$ |
| Indirect Costs | \$ |
| Other | \$ |
| Т | OTAL FIXED ALLOCATION \$ |

II. PROGRAM-SPECIFIC BUDGET(S) FOR FIXED ALLOCATION

| Program Name: | JPCF Funds |
|-------------------------------|------------|
| Salaries and Benefits | ** |
| Services and Supplies | \$ |
| Professional Services | \$ |
| Community-Based Organizations | \$ |
| Fixed Assets/Equipment | \$ |
| Indirect Costs | \$ |
| Other | \$ |
| Total | \$ |

A. <u>Description of Program-Specific Services(s)</u>:

B. <u>Service Categories for Fixed Allocation Program(s)</u>:

| Program Name: | JPCF Funds |
|-------------------------------|------------|
| Salaries and Benefits | \$ |
| Services and Supplies | \$ |
| Professional Services | \$ |
| Community-Based Organizations | \$ |
| Fixed Assets/Equipment | \$ |
| Indirect Costs | \$ |
| Other | \$ |
| TOTAL | \$ |

- A. <u>Description of Program-Specific Services(s)</u>:
- B. Service Categories for Fixed Allocation Program(s):

ATTACHMENT B

JPCF - CAMP ALLOCATION ELIGIBILITY FORM

Eligible counties will receive an allocation from the JPCF state fund appropriation - based upon their reported number of occupied camp bed days.

A camp, for the purpose of allocating funds from subparagraph (C) of paragraph (2) of subdivision (b) of Section 18220 of the Welfare and Institutions Code (WIC), is defined by WIC Section 881:

881. The board of supervisors of any county may, by ordinance, establish juvenile ranches, camps, or forestry camps, within or without the county, to which persons made wards of the court on the ground of fitting the description in Section 602 may be committed. As far as possible, the provisions of this chapter relating to commitments to the probation officer shall apply to commitments to those juvenile facilities, except that where any ward proves to be unfit to remain in any facility, in the opinion of the superintendent or director thereof, the superintendent or director shall make a recommendation to the probation department for consideration for other commitment. Complete operation and authority for the administration shall be vested in the county.

| Based on this definition of | camp, do you anticipate your county being eligible for a camp allo | cation |
|-----------------------------|--------------------------------------------------------------------|--------|
| in the 2006-07 fiscal year? | es □ No □ | |

Please list which of the service(s) from the table below (§18221 W&I) will be provided, fully or in part, from the camp allocation (provide the number of the service(s) as designated in the statute:

JPCF Service Categories

- Educational Advocacy/Attendance Monitoring
- 2. Mental Health Assessment/Counseling
- 3. Home Detention
- 4. Social Responsibility Training
- 5. Family Mentoring
- 6. Parent Peer Support
- 7. Life Skills Counseling
- 8. Prevocational/Vocational Training

- 9. Family Crisis Intervention
- 10. Ind., Family, & Group Counseling
- 11. Parenting Skills Development12. Drug and Alcohol Education
- 13. Respite Care
- 14. Counseling, Monitoring, & Treatment
- 15. Gang Intervention
- 16. Sex and Health Education

- 17. Anger Mgmt., Violence Prev., Conflict Resolution
- 18. Aftercare Services
- 19. Information/Referral-Community Services
- 20. Case Management
- 21. Therapeutic Day Treatment
- 22. Transportation for AB 139 Services
- 23. Emergency and Temporary Shelter

ATTACHMENT C

SAMPLE BOARD OF SUPERVISORS' RESOLUTION

The following sample, while not necessarily in the format used by counties, includes the required assurances that must be a part of the Board of Supervisors' resolution submitted to the Corrections Standards Authority for the Juvenile Probation and Camps Funding Program.

WHEREAS the (*insert name of probation department*) desires to participate in the Juvenile Probation and Camps Funding (JPCF) Program administered by the Corrections Standards Authority (hereafter referred to as CSA).

NOW, THEREFORE, BE IT RESOLVED that the Chief Probation Officer of (*insert name of county*) is authorized to sign on behalf of the Board of Supervisors the JPCF Program Agreement with the CSA, including any extensions or amendments thereof.

BE IT FURTHER RESOLVED that the county agrees to abide by the statutes governing the JPCF Program as well as the terms and conditions of the Agreement as set forth by the CSA, including the retention of financial records substantiating claimed expenditures and the submission of Semi-Annual Progress Reports.

Passed, approved, and adopted by the Board of Supervisors of (*insert name of county*) in a meeting thereof held on (insert date) by the following:

| | Ayes: | |
|--------|-----------------|-------|
| | Noes: | |
| | Absent: | |
| Signat | ure: | Date: |
| Typed | Name and Title: | |
| ATTES | ST: Signature: | Date: |
| | Name and Title: | |